In the Claims:

1-48. (Cancelled)

49. (Currently Amended) A method of decreasing blood pressure in a heart chamber, comprising:

implanting a shunt between a left atrium and a right atrium of the heart, such that a first end of said shunt resides in said left atrium and a second end of said shunt resides in said right atrium, thereby enabling blood flow between said left atrium and said right atrium and decreasing blood pressure in an atrium: allowing an amount of blood suitable to reduce blood pressure in said left atrium, to flow from said left atrium to said right atrium via said shunt when a pressure differential between said left atrium and said right atrium reaches a threshold thereby decreasing blood pressure in a heart chamber.

50. (Previously Presented) The method of claim 49, wherein said implanting is effected by positioning said shunt through a septum of the heart and anchoring said shunt using fixation elements attached thereto.

51-58. (Cancelled)

59. (Previously Presented) A device for decreasing blood pressure in a heart chamber, comprising:

a shunt configured for positioning within a septum between a left atrium and a right atrium of the heart such that a first end of said shunt resides in said left atrium and a second end of said shunt resides in said right atrium, said shunt including a valve being configured for opening when a pressure differential between said left atrium and said right atrium is 12 mmHg or above.

60-67 (Cancelled)

68. (Previously Presented) The device of claim 59, wherein said shunt has a diameter of less than 5 mm.

- 69. (Previously Presented) The device of claim 59, wherein said valve is configured to allow passage of a relatively small volume of blood relative to an ejection volume of the heart.
- 70. (Previously Presented) The device of claim 59, wherein said shunt has a length not substantially greater than a thickness of said septum.

71-72. (Cancelled)

73. (Previously Presented) The device of claim 59, wherein said valve is capable of gradual opening and/or closing.

74-77. (Cancelled)

78. (Previously Presented) The device of claim 59, further comprising fixation elements attached to opposite sides of said shunt and being for flanking said septum.

79-83. (Cancelled)

84. (Previously Presented) A method of controlled decreasing of blood pressure in a heart chamber, comprising:

implanting a valve in a heart septum between two heart atria, such that said valve opens responsive to a pressure level of an exacerbated state of heart failure but not under normal pressures of systole and diastole of a normal heart.

- 85. (Cancelled)
- 86. (Previously Presented) The method of claim 84, wherein implanting said valve in the heart comprises implanting between a left atrium and a right atrium, such that opening said valve allows flow of blood from the left atrium to the right atrium.

- 87. (Previously Presented) The method of claim 84, wherein said valve is configured to open only when the pressure in the left atrium is above a predetermined threshold.
- 88. (Previously Presented) The method of claim 87, wherein said valve is configured to open only when the pressure in the left atrium is above 12mmHg.
- 89. (Previously Presented) The method of claim 84, wherein implanting said valve comprises implanting in a manner which leads blood to a right atria of said heart.

90-91. (Cancelled)

92. (Previously Presented) A method according to claim 84, wherein said valve allows passage of blood therethrough only during diastole.

93-96. (Cancelled)

- 97. (Previously Presented) A method according to claim 84, wherein said valve includes a sensor for sensing a state of the heart and wherein said valve opens at least partially responsive to readings of said sensor.
- 98. (Previously Presented) A method according to claim 84, wherein said valve is configured to open when the heart suffers from an exacerbated absolute arterial pressure or an exacerbated differential arterial pressure.
- 99. (Previously Presented) A method according to claim 84, wherein said valve is configured to close after drainage of an amount of blood sufficient to reduce the mean left atrium pressure by 5mmHg.
- 100. (Previously Presented) A method according to claim 84, wherein said valve is configured to open in response to a differential pressure level between its opposite ends.

- 101. (Previously Presented) The method of claim 84, wherein said valve is implanted via a percutaneous procedure.
- 102. (Previously Presented) The method of claim 84, wherein said valve is implanted in a transseptal hole.
- 103. (Currently Amended) A device for installation in a heart, comprising:
 a shunt configured for positioning within a septum between atria of the heart;
 a sensor adapted to sense a parameter indicative of a state of the heart; and
 a controller adapted to control flow through said shunt in response to readings
 from the sensor indicating a pressure above 12mmHg.

104-106. (Cancelled)

- 107. (Currently Amended) The device of claim 405103, wherein said controller opens the said valve when said sensor indicates a pressure above 15mmHg.
- 108. (Currently Amended) The device of claim 105103, wherein said controller opens said valve when said sensor indicates a pressure above 20mmHg.

109-112. (Cancelled)